

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>HA/ie</i>		<i>08-09-01</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>R</i>	<i>02</i>	<i>10/02/01</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected  
 - ..... Allowed  
 (Through numeral)..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1	<i>11-11-8/02</i>
2	<i>11/02</i>
3	<i>11/02</i>
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19	<i>11-11-8/02</i>
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23	<i>11-11-8/02</i>
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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*830*  
*10/02/01*